TRANSMITTAL LETTER

P00000115009

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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SUBJECT:	KIKO MANAGEI (PROPOSED CORPORAT		DE SUFFIX)
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for .			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL COR	Status PY REQUIRED
FROM: FERNANDO ALZATE Name (Printed or typed)			
1800 SE Hwy 42			
SUMMERFIELD, FL 3449/FE 8 City, State & Zip			
	OMMERFIELD, FL. 3447 ESCRETARY OF STARY		
			9:34 STATE LORIDA

NOTE: Please provide the original and one copy of the articles.

8/10/18

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

KIKO MANAGEMENT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2330 SOUTH PINE AVENUE OCALA, FL 34471

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESTAURANT MANAGEMENT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name (s) and address (es):

FERNANDO ALZATE, 1800 S.E. HIGHWAY 42, SUMMERFIELD FL 34491

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

FERNANDO ALZATE, 1800 S.E. HIGHWAY 42, SUMMERFIELD FL 34491

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FERNANDO ALZATE, 1800 S.E. HIGHWAY 42, SUMMERFIELD FL 34491

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree and agree to act in this capacity

Signature/Registered Agent

Incorporator

12/11/00

DEC 12 AN 9: 34

ECRETARY OF STATE
AHASSEE, FLORIDA